

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BT		1-13-00
O.I.P.E. CLASSIFIER		12/	2/2
FORMALITY REVIEW	BT	64934	2 800
RESPONSE FORMALITY REVIEW	BT	64934	3 900

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	1/13/00
2	✓	✓	1/13/00
3	✓	✓	1/13/00
4	✓	✓	1/13/00
5	✓	✓	1/13/00
6	✓	✓	1/13/00
7	✓	✓	1/13/00
8	✓	✓	1/13/00
9	✓	✓	1/13/00
10	✓	✓	1/13/00
11	✓	✓	1/13/00
12	✓	✓	1/13/00
13	✓	✓	1/13/00
14	✓	✓	1/13/00
15	✓	✓	1/13/00
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47	✓	✓	1/13/00
48	✓	✓	1/13/00
49	✓	✓	1/13/00
50	✓	✓	1/13/00

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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JCS43 U.S. PTO  
09/473391

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Form PTO-41  
(Rev. 5-99)